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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/612,081
		Filing Date	July 2, 2003
		First Named Inventor	Wai Lam
		Art Unit	2186
		Examiner Name	TBA
Total Number of Pages in This Submission		Attorney Docket Number	34826-1016

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Jonathan Tyler, Esq.
Signature	
Date	April 21, 2004

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/612,081
Filing Date	07/02/2003
First Named Inventor	Wail Lam
Title	Snapshot Marker
Art Unit	2186
Examiner Name	n/a
Attorney Docket Number	34826-1016

I hereby appoint:

 Practitioners associated with the Customer Number:

000041881

OR

 Practitioner(s) named below:

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<input checked="" type="checkbox"/>	Firm or Individual Name	Kaye Scholer LLP	
Address	425 Park Avenue		
Address			
City	New York	State	NY
Country	US	Zip	10022-3598
Telephone	212-836-8000	Fax	212-836-8689

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Name	Seth R. Hirschowitz, Esq., General Counsel, FalconStor Software, Inc.		
Signature			
Date	3/9/04	Telephone	(631) 962-1122

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of _____ forms are submitted.

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